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GOVERNMENT OF TAMIL NADU  
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# TAMIL NADU GOVERNMENT GAZETTE

## EXTRAORDINARY

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### Part II—Section 2

**Notifications or Orders of interest to a Section of the public  
issued by Secretariat Departments.**

#### NOTIFICATIONS BY GOVERNMENT

#### LABOUR WELFARE AND SKILL DEVELOPMENT DEPARTMENT

**Tamil Nadu Manual Workers (Regulation of Employment and Conditions of work) Act, 1982**

#### AMENDMENTS TO NOTIFICATION

[G.O.Ms. No.124, Labour Welfare and Skill Development (I2),21st July 2023,  
ஆடி 5, சோபகிருது, திருவங்ஞலூர் ஆண்டு-2054.]

No. II(2)/LWSD/693(c)/2023.

In exercise of the powers conferred by section 4 of the Tamil Nadu Manual Workers (Regulation of Employment and Conditions of Work) Act, 1982 (Tamil Nadu Act 33 of 1982), the Governor of Tamil Nadu, after consultation with the Advisory Committee, hereby makes the following amendments to the Tamil Nadu Manual Workers (Construction Workers) Welfare Scheme, 1994, namely:-

#### AMENDMENTS

In the said Scheme,—

(1) in clause 3, after item (10), the following item shall be added, namely:-

“(11) Assistance for transportation of dead body of deceased manual worker who dies due to an accident at worksite.”;

(2) after clause 14A, the following clause shall be inserted, namely:-

**“14B. Assistance for transportation of dead body of deceased manual worker who dies due to an accident at worksite.”** (1) If a manual worker dies due to an accident occurred at worksite, his nominee or legal heirs are eligible for financial assistance for transportation of dead body of the deceased manual worker, from hospital to his native place.

**Explanation.**— For the purpose of this clause, “accident” means death resulting to a manual worker solely and directly from accident arising out of and in the course of his employment but does not include any intentional self-injury, suicide, attempted suicide, injury caused while under the influence of intoxicating liquor or drugs or caused by insanity or resulting

from the commission of any breach of the law, or rules, regulations or instructions applicable, from time to time.

(2) The amount of financial assistance shall be payable as follows:-

(a)	<u>Manual Worker of Tamil Nadu</u> — Transportation cost within the State of Tamil Nadu including Union Territory of Puducherry.	Actual transportation cost of Government mortuary van from hospital to worker's native place.
(b)	<u>Inter-State Migrant Worker</u> — Transportation cost outside the State of Tamil Nadu.	Actual transportation cost of Government mortuary van / train or transportation cost of air up to maximum of Rs.1,00,000/- (Rupees One Lakh only) from hospital to worker's native place in the concerned State.

(3) Claim.— (a) Immediately upon the happening of any accident while in pursuit of his employment resulting in death at worksite, the claim shall be made by the nominee or legal heir in Form-DD in Schedule II, to the Assistant Commissioner of Labour (Social Security Scheme) of the respective district.

(b) The Assistant Commissioner of Labour (Social Security Scheme) of the respective district shall examine every application for grant of financial assistance for transportation of dead body in accordance with the provisions of this clause.

(c) The nominee or legal heirs shall produce First Information Report, legal heir certificate, death certificate, and post-mortem reports issued by an authority who is competent to issue such certificates or any other documents called for by the Assistant Commissioner of Labour (Social Security Scheme) of the respective district.

(d) The Assistant Commissioner of Labour (Social Security Scheme) of the respective district shall complete due verification within two working days from the receipt of the claim and submit the application for the grant of financial assistance mentioned in sub-clause (2) to the respective District Collector / Chairman, District Monitoring Committee to accord permission for sanctioning the claim. The decision of the District Collector shall be final. Once the claim application is approved by the District Collector, then the Assistant Commissioner of Labour (Social Security Scheme) of the respective district shall sanction the financial assistance to the nominee or legal heirs on production of the vouchers of the actual expenditure incurred and disburse the financial assistance through the District Collector concerned.

(e) In case of emergency, the District administration concerned may bear the cost of transporting the body of deceased construction workers including Inter-State migrant workers to their native places to avoid delay. This financial assistance shall be reimbursed to the concerned District administration after following the procedures mentioned in sub-clause 3(d).

(3) In SCHDULE II, after FORM-D, the following Form shall be inserted, namely:-

**“[FORM – DD**

**[See clause 14B (3) (a)]**

APPLICATION FOR GRANT OF FINANCIAL ASSISTANCE FOR TRANSPORTATION OF DEAD BODY OF MANUAL WORKER WHO DIES DUE TO ACCIDENTAL DEATH AT WORKSITE.

To

The Assistant Commissioner of Labour (Social Security Scheme),

..... district

1. (a) Name of the deceased manual worker :  
 (b) Address (in full at the time of death) :  
 (c) Age (on the date of death) :  
 (d) Nature of work :  
 (e) Aadhaar number :
2. (a) Area :  
 (b) Place :  
 (c) Taluk :  
 (d) District :  
 (e) State :

3. Whether deceased worker is,-

- (a) Registered with Board : .....
- (b) Unregistered : .....
- (c) Registered Inter-State Migrant worker : .....
- (d) Unregistered Inter-State Migrant worker : .....

4. Date and time of accident : .....

5. Place of accident (Address in full) : .....

6. Date and time of death : .....

7. Place of death : .....

8. Cause of death : .....

9. Name of the nominee / legal heirs

- (a) Relationship with the deceased worker : .....
- (b) Age of the nominee/legal heirs : .....
- (c) Address in full (with PIN Code No.) : .....
- (d) Aadhaar number : .....

10. Bank details of the nominee/legal heirs

- (a) Name of the Bank and Bank Account Number : .....
- (b) MICR code and IFSC code number : .....

(First page of the Bank pass book should be enclosed)

11. Documents:-

- (i) Attested copy of First Information Report from the Police Station nearer to the place of accident to be enclosed : .....
- (ii) Post-Mortem report should be enclosed in original : .....
- (iii) Death Certificate should be enclosed in original : .....
- (iv) Legal heir certificate should be enclosed in original: .....

12. Transportation cost within the State including Union Territory of Puducherry (Actual bill of Government Mortuary Van should be enclosed in original) : .....

13. Transportation cost for outside the State (Actual bill of Government Mortuary Van/Train/Air should be enclosed in original) : .....

Signature of the nominee/legal heirs

**DECLARATION BY THE NOMINEE/LEGAL HEIRS.\*\***

I hereby declare that the particulars furnished above are correct and true to the best of my knowledge. In the event of any of the information given above is ultimately found to be false, I hereby agree to refund in full the amount received as financial assistance for Transportation of dead bodies due to accidental death at worksite.

I also hereby declare that I have not received similar benefit by claim in any other Welfare Board or Boards constituted by the Government of Tamil Nadu or under any other Government Schemes.

Place:

Date:

Signature of the nominee/legal heirs

\*\*Any false declaration / certification will entail legal action.

**SANCTION**

I hereby sanction, after due verification a sum of Rs...../- (Rupees ..... only) as financial assistance to Thiru/Tmt./Selvi ..... nominee / legal heirs of manual worker for transportation of dead body due to accidental death at worksite of Thiru/Tmt./Selvi..... a manual worker.

Place :

Date :

Assistant Commissioner of Labour  
(Social Security Scheme)

.....district.

**ACKNOWLEDGEMENT SLIP**

Received from Selvi/Thiru/Tmt..... claim application for sanction of financial assistance towards Transportation of dead body due to accidental death at worksite in respect of deceased manual worker Selvi/Thiru/Tmt.....

Signature of the Assistant Commissioner of Labour  
(Social Security Scheme) with date  
..... district

Office Seal :

Name :

Designation : ..

].".

Md. NASIMUDDIN,  
*Additional Chief Secretary to Government.*